Approved for use through 7/31/2006, OMB 0651-0031

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| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875                                                                                                        |                                                                 |                                           |              |                                             |                  |                    |                        | Application of Docks Number 4 |                    |                        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|-------------------------------------------|--------------|---------------------------------------------|------------------|--------------------|------------------------|-------------------------------|--------------------|------------------------|
| CLAIMS AS FILED – PART I: OTHER THAN                                                                                                                                           |                                                                 |                                           |              |                                             |                  |                    |                        |                               |                    |                        |
| (Column 1) (Column 2)                                                                                                                                                          |                                                                 |                                           |              |                                             | umn 2)           | SMALL E            | NTITY                  | OR                            |                    | ENTITY                 |
| FOR NUMBER FILE                                                                                                                                                                |                                                                 |                                           | R FILED      | NUMBER EXTRA                                |                  | RATE               | FEE                    |                               | RATE               | FEE /                  |
| BASIC FEE<br>(37 CFR 1.16(a))                                                                                                                                                  |                                                                 |                                           |              |                                             |                  | s                  | OR                     |                               | s                  |                        |
|                                                                                                                                                                                | AL CLAIMS<br>CFR 1.16(c))                                       |                                           | minus 20 = • |                                             |                  | x s=               |                        | OR                            | x s=               |                        |
|                                                                                                                                                                                | PENDENT CLAIM<br>FR 1.16(b))                                    | 1S                                        | minus 3 =    |                                             |                  | x s=               |                        | OR                            | x s =              |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))                                                                                                                              |                                                                 |                                           |              |                                             | + \$=            |                    | OR                     | + 5 =                         | 7                  |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2.                                                                                                      |                                                                 |                                           |              |                                             |                  | TOTAL              |                        | OR                            | TOTAL              |                        |
|                                                                                                                                                                                |                                                                 |                                           |              |                                             |                  |                    |                        |                               |                    |                        |
| CLAIMS AS AMENDED - PART II  OR OTHER THAN                                                                                                                                     |                                                                 |                                           |              |                                             |                  |                    |                        |                               |                    | R THAN                 |
|                                                                                                                                                                                |                                                                 | (Column 1)<br>CLAIMS                      | 1            | (Column 2)<br>HIGHEST                       | (Column 3)       | SMALL E            | ENTITY                 | ۰ .                           | SMALL              | ENTITY                 |
| AMENDMENT A                                                                                                                                                                    | 6/24/07                                                         | REMAINING<br>AFTER<br>AMENDMENT           |              | NUMBER<br>PREVIOUSLY<br>PAID FOR            | PRESENT<br>EXTRA | RATE               | ADDI-<br>TIONAL<br>FEE |                               | RATE               | ADDI-<br>TIONAL<br>FEE |
| ) ME                                                                                                                                                                           | Total<br>(37 CFR 1.16(c))                                       | 51                                        | Minus        | 72                                          | = 0              | x s <u> </u>       |                        | OR                            | x s=               | 2                      |
| EN                                                                                                                                                                             | Independent<br>(37 CFR 1.16(b))                                 | . 4                                       | Minus        | 5                                           | = <i>U</i>       | x s=               |                        | OR                            | x s=               | X                      |
| AM                                                                                                                                                                             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) |                                           |              |                                             |                  | +s =               |                        | OR                            | +s =               | Y                      |
|                                                                                                                                                                                |                                                                 |                                           |              |                                             |                  | TOTAL<br>ADD'L FEE |                        | OR                            | TOTAL<br>ADD'L FEE |                        |
| (Column 1) (Column 2) (Column 3)                                                                                                                                               |                                                                 |                                           |              |                                             |                  |                    |                        |                               |                    |                        |
| NT B                                                                                                                                                                           |                                                                 | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | RATE               | ADDI-<br>TIONAL<br>FEE |                               | RATE               | ADDI-<br>TIONAL<br>FEE |
| OME                                                                                                                                                                            | Total<br>(37 CFR 1.16(c))                                       | •                                         | Minus        | **                                          | =                | x s=               |                        | OR                            | x s=               |                        |
| AMENDMENT                                                                                                                                                                      | Independent<br>(37 CFR 1.16(b))                                 |                                           | Minus        | •••                                         |                  | x s=               |                        | OR                            | x s=               |                        |
| ¥                                                                                                                                                                              | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) |                                           |              |                                             |                  | + \$=              |                        | OR                            | ;<br>+ s=          |                        |
|                                                                                                                                                                                |                                                                 |                                           |              |                                             |                  | TOTAL ADD'L FEE    |                        | OR                            | TOTAL<br>ADD'L FEE |                        |
|                                                                                                                                                                                |                                                                 | (Column 1)                                | ,            | (Column 2)                                  | (Column 3)       |                    | •                      | 7                             |                    |                        |
| AMENDMENT C                                                                                                                                                                    |                                                                 | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | RATE               | ADDI-<br>TIONAL<br>FEE |                               | RATE               | ADDI-<br>TIONAL<br>FEE |
|                                                                                                                                                                                | Total<br>(37 CFR 1.16(c))                                       | •                                         | Minus        | **                                          | =                | x \$=              |                        | OR                            | x \$=              |                        |
|                                                                                                                                                                                | Independent<br>(37 CFR 1.16(b))                                 | •                                         | Minus        | ***                                         | =                | x s=               |                        | OR                            | x s=               |                        |
| AM                                                                                                                                                                             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) |                                           |              |                                             |                  | + \$=              |                        | OR                            | + \$ =             |                        |
|                                                                                                                                                                                |                                                                 |                                           |              |                                             |                  | TOTAL<br>ADD'L FEE |                        | OR -                          | TOTAL<br>ADD'L FEE |                        |
| • If the entry in column 1 is less than the entry in column 2, write "0" in column 3. • If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". |                                                                 |                                           |              |                                             |                  |                    |                        |                               |                    |                        |
| *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".                                                                                       |                                                                 |                                           |              |                                             |                  |                    |                        |                               |                    |                        |

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.